

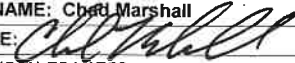
OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Benton
Conventional or Direct Filtration

System Name: Corvallis, City of ID#: OR4100225 WTP:- WTP - A Month/Year: Jun / 2024

Day	12 AM (NTU)	4 AM (NTU)	8 AM (NTU)	NOON (NTU)	4 PM (NTU)	8 PM (NTU)	Highest Reading of the Day 1 (NTU)
1	Off	Off	0.02	0.02	0.02	Off	0.02
2	Off	Off	0.02	0.02	0.02	Off	0.02
3	Off	Off	0.03	0.02	0.02	Off	0.03
4	Off	Off	0.02	0.02	0.02	Off	0.02
5	Off	Off	0.02	0.02	0.02	Off	0.02
6	Off	Off	0.02	0.02	0.02	Off	0.02
7	Off	Off	0.02	0.02	0.02	Off	0.03
8	Off	Off	0.02	0.02	0.02	Off	0.02
9	Off	Off	0.02	0.02	0.02	Off	0.02
10	Off	Off	0.02	0.02	0.02	Off	0.02
11	Off	Off	0.02	0.02	0.02	Off	0.02
12	Off	Off	0.02	0.02	0.02	Off	0.02
13	Off	Off	0.02	0.02	0.02	Off	0.02
14	Off	Off	0.02	0.02	0.02	Off	0.02
15	Off	Off	0.02	0.02	0.02	Off	0.03
16	Off	Off	0.02	0.02	0.02	Off	0.03
17	Off	Off	0.02	0.02	0.02	Off	0.04
18	Off	Off	0.02	0.02	0.02	Off	0.03
19	Off	Off	0.02	0.02	0.02	Off	0.02
20	Off	Off	0.02	0.02	0.02	Off	0.04
21	Off	Off	0.02	0.02	0.02	Off	0.02
22	Off	Off	0.02	0.02	0.02	Off	0.03
23	Off	Off	0.02	0.02	0.02	Off	0.03
24	Off	Off	0.02	0.02	0.02	Off	0.03
25	Off	Off	0.02	0.02	0.02	Off	0.02
26	Off	Off	0.02	0.02	0.02	Off	0.02
27	Off	Off	0.02	0.02	0.02	Off	0.02
28	Off	Off	0.02	0.02	0.02	Off	0.02
29	Off	Off	0.02	0.02	0.02	Off	0.02
30	Off	Off	0.02	0.02	0.02	Off	0.02

Conventional or Direct Filtration			Monthly Summary (Answer Yes or No)		
95% of the 4-hour turbidity readings ≤ 0.3 NTU?	<input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? (see back)	<input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl2 residuals at entry point ≥ 0.2 mg/l?	<input checked="" type="radio"/> Yes <input type="radio"/> No
All the 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes <input type="radio"/> No				
All turbidity readings < IFE ² triggers?	<input checked="" type="radio"/> Yes <input type="radio"/> No				

Notes:

PRINTED NAME: Chad Marshall	Date: 07/01/2024
SIGNATURE: 	Cert #: T-08843
PHONE #: (541) 754-1758	

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum.
² IFE = Individual Filter Effluent (OAR 333-061-0040 (1) (e) (B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

Corvallis, City of		ID#: 41 00225 WTP-: WTP - A			Month/Year: Jun / 2024		Required Log Inactivation: 0.5	
Date / Time	Minimum Cl ₂ Residual at 1st User (C)	Contact Time	Actual CT	Temp	pH	Required CT	CT Met?	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[°C]		Use Tables	Yes / No	[GPM]
01 / 0851	1.27	48.0	61	16	6.7	13	Yes	12,083
02 / 1438	1.26	51.0	64	16	6.8	13	Yes	11,225
03 / 1251	1.16	52.0	60	14	6.7	19	Yes	11,110
04 / 1254	1.29	55.0	71	14	6.7	19	Yes	10,139
05 / 0841	1.28	52.0	67	14	6.7	19	Yes	11,042
06 / 0520	1.25	49.0	61	15	6.8	13	Yes	11,736
07 / 1321	1.31	52.0	68	17	6.7	13	Yes	10,833
08 / 1217	1.31	45.0	59	17	6.7	13	Yes	12,639
09 / 1159	1.23	46.0	57	17	6.7	13	Yes	12,222
10 / 0957	1.25	48.0	60	18	6.6	13	Yes	12,083
11 / 1509	1.07	45.0	48	18	6.9	13	Yes	12,846
12 / 0623	1.33	49.0	65	18	6.6	13	Yes	11,805
13 / 0923	1.24	49.0	61	16	6.7	13	Yes	11,736
14 / 0956	1.28	48.0	61	16	6.8	13	Yes	11,875
15 / 0935	1.26	55.0	69	16	6.7	13	Yes	10,416
16 / 1112	1.26	55.0	69	15	6.8	13	Yes	10,416
17 / 0620	1.21	55.0	67	16	6.9	13	Yes	10,416
18 / 0613	1.12	72.0	81	15	6.9	13	Yes	7,847
19 / 0858	1.32	59.0	78	15	6.8	13	Yes	9,653
20 / 1458	1.28	48.0	61	18	6.8	13	Yes	12,083
21 / 0903	1.26	45.0	57	18	6.7	13	Yes	12,639
22 / 0926	1.30	45.0	59	19	6.6	13	Yes	12,639
23 / 1548	1.27	46.0	58	19	6.8	13	Yes	12,292
24 / 0539	1.11	49.0	54	20	6.8	10	Yes	11,736
25 / 1516	1.31	46.0	60	19	6.8	13	Yes	12,499
26 / 1358	1.17	48.0	56	18	6.7	13	Yes	12,014
27 / 0953	1.24	44.0	55	17	6.7	13	Yes	13,056
28 / 1502	1.24	46.0	57	17	6.8	13	Yes	12,499
29 / 0951	1.28	45.0	58	17	6.7	13	Yes	12,708
30 / 1533	1.29	44.0	57	19	6.7	13	Yes	13,056

" 3 If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by next business day.

Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf"